April 8, 2020 P.M.

	D STATES DISTRICT COUF IERN DISTRICT OF NEW \				
	D STATES OF AMERICA	X			
	- v -			WAIVER OF RIGHT TO BE PRESE	<u>VT</u>
	Courtright	Defendant. X		20 Cr 531 (C\$)	
<u>Check</u>	Proceeding that Applies				
Non-transfer transfer	Entry of Plea of Guilty				
	attorney about those charges. I understand District of New York to also aware that the pu with travel and restrict attorney. By signing the appear in person befor to advise the court that as I enter my plea so lo participate in the process.	charges. I have decid I have a right to apperent of guilt blic health emergency address to the federal districtions of the judge to enter a till willingly give up anyong as the following coeding and to be able to	led that I wish ear before a judy and to have no created by the local courthouse. I had advise the couplea of guilty. Expright I might had speak on my local coupleans are metors are metors.	leral law. I have consulted with to enter a plea of guilty to cert dge in a courtroom in the Southing attorney beside me as I do. I e COVID-19 pandemic has interfer have discussed these issues with left that I willingly give up my right By signing this document, I also wave to have my attorney next to eat. I want my attorney to be able behalf during the proceeding. I ame during the proceeding if I wish	ain ern am red my to ish me to lso
Date:	Print Name		Signature of	Defendant	
_X	Sentence	·			
	of New York at the time	e of my sentence and to	o speak directly	a courtroom in the Southern Distr in that courtroom to the judge w mergency created by the COVID-	ho

of New York at the time of my sentence and to speak directly in that courtroom to the judge who will sentence me. I am also aware that the public health emergency created by the COVID-19 pandemic has interfered with travel and restricted access to the federal courthouse. I do not wish to wait until the end of this emergency to be sentenced. I have discussed these issues with my attorney and willingly give up my right to be present, at the time my sentence is imposed, in the courtroom with my attorney and the judge who will impose that sentence. By signing this document, I wish to advise the court that I willingly give up my right to appear in a courtroom in the Southern District of New York for my sentencing proceeding as well as my right to have my attorney next to me at the time of sentencing on the following conditions. I want my attorney to

be able to participate in the proceeding and to be able to speak on my behalf at the proceeding. I also want the ability to speak privately with my attorney at any time during the proceeding if I wish to do so.

Date:	January 22, 2021 Robert Courtright	Robert Courtright	(Mr. Courtright authorized Benjamin Gold to affix his digital signature to this form during a videoconference on January 22, 2021)
	Print Name	Signature of Defendant	
my clie this wa	y affirm that I am aware of my obligation nt's rights to attend and participate in the siver and consent form. I affirm that addings being held with my client and me bo	criminal proceedings encompassed my client knowingly and voluntari	by this waiver, and
Date:	Benjamin Gold	3	
	Print Name	Signature of Defense Counse	
I used t	dum for a defendant who requires service he services of an interpreter to discuss the ted this document, in its entirety, to the de eter's name is:	ese issues with the defendant. The i	nterpreter also d it. The
Date:	Signature of Defense Counsel		
Accept	ed: Cally Sevel Signature of Judge		